

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751177

**Entity Name:** THE PLAZA OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

221-223 COLUMBIA DRIVE  
CAPE CANAVERAL, FL 32920

**Current Mailing Address:**

221-223 COLUMBIA DRIVE  
CAPE CANAVERAL, FL 32920

**FEI Number: 59-2231169**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DOING ASSOCIATION BUSINESS,INC  
221-223 COLUMBIA DR OFFICE  
CAPE CANAVERAL, FL 32920 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name DRUCQUER, PENNY  
Address 221 COLUMBIA DR., #342  
City-State-Zip: CAPE CANAVERAL FL 32920

Title P  
Name CLEARY, JOHN  
Address 221 COLUMBIA DR., #239  
City-State-Zip: CAPE CANAVERAL FL 32920

Title S  
Name BALLANTINE, ANN  
Address 221 COLUMBIA DR., #144  
City-State-Zip: CAPE CANAVERAL FL 32920

Title TR  
Name MALCOM, JUNANITA  
Address 233 COLUMBIA DRIVE #310  
City-State-Zip: CAPE CANAVERAL FL 32920

Title D  
Name KANAPICKI, FRANK  
Address 221 COLUMBIA DR 225  
City-State-Zip: CAPE CANAVERAL FL 32920

Title DIRECTOR  
Name HARLTEY, WAYNE  
Address 223 COLIMBIA DRIVE  
128  
City-State-Zip: CAPE CANAVERAL FL 32920

Title DIRECTOR  
Name LIPOWITZ, KEN  
Address 223 COLUMBIA DRIVE  
115  
City-State-Zip: CAPE CANAVERAL FL 32920

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOHN CLEARY**

**PRESIDENT**

**01/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date